MISSION DENTAL CARE
KYUNG H. CHUNG D.D.S.
941 W. Mission Blvd., Suite H., Ontario, California 91761
OFFICE TELEPHONE
(714) 984-7883

MARCH 1, 1994

CHARLIE SHEPHARD
C/O: ANGELA SHEPHARD
P. O. BOX 521
ONTARIO, CA 91761

DEAR MR. SHEPHARD,

ON 12-17-93 A CALL WAS MADE TO YOUR INSURANCE COMPANY TO VERIFY ELIGIBILITY AND BENEFITS FOR YOUR DEPENDENT ANGELA PRIOR TO HER SCHEDULED APPOINTMENT ON 12-22-93. PER MRS. DANIELS AT THE INSURANCE COMPANY WE WERE GIVEN THE INFORMATION THAT ANGELA WAS COVERED AS YOUR DEPENDENT AND BENEFITS WERE THE SAME AS YOURS WHICH WE ALREADY HAVE ON FILE.

WE AT MISSION DENTAL CARE ALWAYS VERIFY THIS INFORMATION TO AVOID THIS PROBLEM FROM HAPPENING PRIOR TO THE PATIENT BEING SEEN. WE LIFE TO UPDATE ANY CHANGES FROM THE INSURANCE AS FAR AS BENEFITS, ELIGIBILITY, OR EVEN A CHANGE IN THE INSURANCE COMPANY TO INFORM THE PATIENTS BEFORE ANY TREATMENT IS STARTED EVERY 6 MONTHS IF PATIENT IS SCHEDULED FOR AN APPOINTMENT.

I HOPE THIS LETTER WILL BE HELPFUL IN RESOLVING THE PROBLEM WITH THE INSURANCE COMPANY. IF ADDITION INFORMATION IS NEEDED FROM OUR OFFICE PLEASE GIVE ME A CALL.

SINCERELY,

NORMA RAMIREZ
Office Manager